UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 17-18765
Linda Olson	
Leonard Olson	
Debtor(s)	
, , , , , , , , , , , , , , , , , , ,	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 06/21/2017.
- 2) The plan was confirmed on <u>NA</u>.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was converted on 10/19/2017.
 - 6) Number of months from filing to last payment: $\underline{0}$.
 - 7) Number of months case was pending: <u>4</u>.
 - 8) Total value of assets abandoned by court order: <u>NA</u>.
 - 9) Total value of assets exempted: \$32,963.00.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$0.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$0.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$0.00
Court Costs \$0.00
Trustee Expenses & Compensation \$0.00
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$0.00

Attorney fees paid and disclosed by debtor: \$0.00

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CONSUMER FINANCIAL SERVICES	Secured	6,379.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	25,510.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	252.24	NA	NA	0.00	0.00
ONEMAIN	Unsecured	34,523.00	NA	NA	0.00	0.00
ADVOCATE SHERMAN HOSPITAL	Unsecured	131.60	NA	NA	0.00	0.00
ASSOCIATED IMAGING	Unsecured	43.02	NA	NA	0.00	0.00
CALVERY/HSBC	Unsecured	810.78	NA	NA	0.00	0.00
CHOICE RECOVERY	Unsecured	238.00	NA	NA	0.00	0.00
COMMONWEALTH FINANCIAL SYST	Unsecured	575.00	NA	NA	0.00	0.00
CONVERGENT/COMCAST	Unsecured	287.00	NA	NA	0.00	0.00
ELGIN LAB	Unsecured	48.60	NA	NA	0.00	0.00
FENTON & MCGARVEY LAW FIRM	Unsecured	899.16	NA	NA	0.00	0.00
GUERRA FAMILY DENTAL	Unsecured	843.00	NA	NA	0.00	0.00
KEYNOTE CONSULTING	Unsecured	186.00	NA	NA	0.00	0.00
KEYNOTE CONSULTING	Unsecured	98.00	NA	NA	0.00	0.00
MIRA REVENUE GROUP	Unsecured	78.60	NA	NA	0.00	0.0
PINNACLE CREDIT	Unsecured	1,613.00	NA	NA	0.00	0.00
PORTFOLIO RECOVERY	Unsecured	669.49	NA	NA	0.00	0.00
PORTFOLIO RECOVERY/CAPITAL ON	Unsecured	1,930.25	NA	NA	0.00	0.00
PRESENTS HEALTH	Unsecured	138.63	NA	NA	0.00	0.0
PRO DENTAL	Unsecured	3,922.00	NA	NA	0.00	0.0
VION HOLDING LLC	Unsecured	930.00	NA	NA	0.00	0.0
WELLS FARGO HOME MORTGAGE	Secured	38,829.00	NA	NA	0.00	0.0
WELLS FARGO HOME MORTGAGE	Secured	0.00	NA	NA	0.00	0.0

Summary of Disbursements to Creditors:			
,	Claim	Principal	Interest
	Allowed	<u>Paid</u>	<u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$0.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$0.00	\$0.00	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$0.00 \$0.00	
TOTAL DISBURSEMENTS :		<u>\$0.00</u>

12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 11/01/2017	By:/s/ Glenn Stearns	
	Trustee	

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.